

MULTIPLE-DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)							SERIAL NO. 10/069510		FILING DATE			
							APPLICANT(S)					
							CLAIMS					
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1								51				
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45								95				
46								96				
47								97				
48								98				
49								99				
50								100				
TOTAL IND.								TOTAL IND.				
TOTAL DEP.								TOTAL DEP.				
TOTAL CLAIMS								TOTAL CLAIMS				